



STATE OF ARKANSAS
Department of Pollution Control and Ecology
P.O. Box 8913 Little Rock, Arkansas 72219-8913
Telephone 501-682-0744

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address CADDY CREEK CERAMIC CO., INC., 1000 CADDY CREEK DR., LEEDS, AL 35094						
4. Generator's Phone ()						
5. Transporter 1 Company Name 6. US EPA ID Number CADDY CREEK CERAMIC CO., INC., 1000 CADDY CREEK DR., LEEDS, AL 35094						
7. Transporter 2 Company Name 8. US EPA ID Number UTD98156242A						
9. Designated Facility Name and Site Address 10. US EPA ID Number REEDS CERAMICS, INC. 1001 REEDS CERAMICS ROAD LEEDS, AL 35094 ARD981057870						
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						
a.		No.	Type	13. Total Quantity	14. Unit Wt/Vol	
b.				001 DM 000005 P		
c.						
d.						
J. Additional Description for Materials Listed Above						
if no alternate TSDF, return to generator						
K. Emergency Response Information:						
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and Arkansas state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name		Signature		Month	Day	Year
<i>Joe A. Shultz</i>		<i>Joe A. Shultz</i>		07	15	2015
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month	Day	Year
<i>Vincent Coville</i>		<i>Vincent Coville</i>		07	15	2015
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month	Day	Year
<i>D. C. Clegg</i>		<i>D. C. Clegg</i>		07	15	2015
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name		Signature		Month	Day	Year

GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete or incorrect manifests are violations of the law, and could be subject to civil or criminal liabilities as specified in APC&EC Regulation 23, Hazardous Waste Management.

INSTRUCTIONS—IMPORTANT: READ ALL INSTRUCTIONS BEFORE COMPLETING

State and Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary, the continuation sheet for both inter- and intrastate shipments. (Continuation sheets are not provided by the state of Arkansas.)

The Arkansas Manifest contains 6 copies. **ALL COPIES MUST BE LEGIBLE.** This form is designed for use on a 12 pitch (elite) typewriter; a firm ball point pen may also be used only if you press down **HARD**. The 6 copies must be distributed in the following way:

- COPY 6: **GENERATOR INITIAL COPY**—The generator keeps this copy once the first transporter signs off and accepts the waste. (BLUE COPY)
- COPY 5: **1ST TRANSPORTER COPY**—The first transporter keeps this copy for their records. (GREEN COPY)
- COPY 4: **2ND TRANSPORTER COPY**—The second transporter keeps this copy for their records. (GOLD COPY)
- COPY 3: **TSDF COPY**—TSDF keeps this copy for their records. (PINK COPY)
- COPY 2: **STATE COPY**—The Arkansas TSDF mails this copy to Arkansas Department of Pollution Control. (YELLOW COPY)
- ORIGNL: **GENERATOR COPY**—The TSDF mails the original copy back to the generator. (WHITE COPY)

IF THE TSDF IS LOCATED OUT-OF-STATE THE IN-STATE GENERATOR MUST SEND A MANIFEST PHOTOCOPY TO THE ARKANSAS DEPARTMENT OF POLLUTION CONTROL ONCE THE MANIFEST HAS BEEN SIGNED OFF BY THE TSDF.

MANIFEST FORM ACQUISITION

1. If the destination (consignment) state supplies a manifest and requires its use, then the generator is obligated to obtain the manifest from that state.
2. If the destination state does not supply the manifest, then the generator is obligated to use an Arkansas Hazardous Waste Manifest.

ARKANSAS WILL NOT ACCEPT THE GENERIC UNIFORM MANIFEST

GENERATOR SECTION

- Item 1: **GENERATOR'S US EPA ID NO / MANIFEST DOCUMENT NO** — Enter the generator's 12 digit EPA identification number. The manifest document number is a unique 5-digit no. the generator assigns to each manifest.
- Item 2: **PAGE 1 OF _____** — Enter the total number of pages used to complete this manifest i.e., the first page plus the number of continuation sheets, if any.
- Item 3: **GENERATOR'S NAME & MAILING ADDRESS** — Enter the name and mailing address of the generator, and provide the site address.
- Item 4: **GENERATOR'S PHONE NUMBER** — Enter a telephone no. with area code where an authorized agent of the generator can be reached in case of an emergency.
- Item 5: **TRANSPORTER 1 COMPANY NAME** — Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6: **US EPA ID NUMBER** — Enter the US EPA 12-digit ID number of the first transporter identified in Item 5.
- Item 7: **TRANSPORTER 2 COMPANY NAME** — If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8: **US EPA ID NUMBER** — If applicable, enter the US EPA 12-digit ID number of the second transporter identified in Item 7.
- Item 9: **DESIGNATED FACILITY NAME & SITE ADDRESS** — Enter the company name and site address of the treatment, storage, disposal facility (TSDF) designated to receive the waste listed on this manifest.
- Item 10: **US EPA ID NUMBER** — Enter the 12-digit US EPA identification number of the designated TSDF listed in Item 9.
- Item 11: **US DOT DESCRIPTION** — All of the following must be entered: the correct US DOT (Dept. of Transportation) name for the waste identified, the assigned DOT Hazard Class and the UN/NA ID Number (e.g. waste sulfuric acid, spent corrosive material, UN1832 RQ). The word "waste" must appear as part of the DOT name. If more than 4 wastes are being shipped, a second manifest or continuation sheets must be used (See 49 CFR 172.201).
- Item 12: **CONTAINERS (NO. & TYPE)** — Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of containers used.

**TABLE 1
CONTAINER TYPES**

DM	Metal drums, barrels, kegs
DW	Wooden drums, barrels, kegs
DF	Fiberboard or plastic drums, barrels, kegs
TP	Tanks portable
TT	Cargo tanks (tank trucks)
TC	Tank cars
DT	Dump truck
CY	Cylinders
CM	Metal boxes, cartons, cases (including roll-offs)
CW	Wooden boxes, cartons, cases
CF	Fiber or plastic boxes, cartons, cases
BA	Burlap, cloth, paper or plastic bags

Item 13: **TOTAL QUANTITY** — Enter the total quantity of waste described on each line. **DO NOT USE FRACTIONS** - See Item 14: Units.

Item 14: **UNIT (WT/VOL.)** — Enter the appropriate abbreviation from Table 2 (below) for the unit of measure used to identify the total quantity of waste described on each line.

TABLE 2 UNITS OF MEASURE

G -	Gallons (liquid only)
P -	Pounds
T -	Tons (2,000 lbs.)
Y -	Cubic yards
L -	Liters (liquids only)
K -	Kilograms
M -	Metric Tons (1,000 kg)
N -	Cubic meters

Item 15: **SPECIAL HANDLING INSTRUCTIONS & ADDITIONAL INFORMATION** — Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information. If any alternate facility is designated, note it here. **FOR INTERNATIONAL SHIPMENTS**: generators must enter the point of departure (city & state) in this space.

GENERATOR'S CERTIFICATION — The Generator must read, sign (by hand), and date the certification. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode in the space.

Item A: **STATE MANIFEST DOCUMENT NUMBER** — Number preprinted by the state of Arkansas except on the continuation sheets. Enter this number on each continuation sheet attached to the manifest.

Item B: **STATE GENERATOR ID** — Are State-issued numbers which are not EPA ID Numbers.

Item C: **STATE TRANSPORTER#1 ID** — Must have Arkansas Permit Number if transporting waste in, through, or out of Arkansas.

Item D: **TRANSPORTER PHONE** — Enter a telephone number with area code where an authorized agent of the transporter can be reached.

Item E: **STATE TRANSPORTER#2 ID** — If applicable, enter Arkansas Permit Number if the second transporter is carrying waste in, through, or out of the Arkansas.

Item F: **TRANSPORTER PHONE** — If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.

Item G: **STATE FACILITY'S ID** — No entry is required by Arkansas.

Item H: **FACILITY PHONE** — Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.

Item I: **WASTE NO** — Enter the 4-digit EPA Hazardous Waste No. as listed in APC&EC Regulation 23, Hazardous Waste Management, Section 281.

Item J: **ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED BELOW** — List additional description of material and alternate TSDF including TSDF address and EPA ID Number.

Item K: **EMERGENCY RESPONSE INFORMATION** — Arkansas requires the generator to list an authorized representative and 24 hour phone number in case of an emergency.

Note: For interstate shipments you may be required to comply with the manifesting requirements of both the receiving and generator states regarding the completion of specific information included in lettered Items A-K. Please check with both generator and receiving states for specific requirements.

TRANSPORTER SECTION

Item 17: **TRANSPORTER 1 ACKNOWLEDGMENT** — Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.

Item 18: **TRANSPORTER 2 ACKNOWLEDGMENT** — If applicable, follow instructions for item 17 for the second transporter.

Note: **ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN ARKANSAS MUST HAVE A VALID ARKANSAS TRANSPORTER PERMIT.**

DESIGNATED FACILITY (TSDF) SECTION

Item 19: **DISCREPANCY INDICATION SPACE** — The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes.

Item 20: **FACILITY OWNER/OPERATOR CERTIFICATION** — Print or type the name of the person accepting the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date.

BURDEN DISCLOSURE STATEMENT

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, S.W., Washington, D.C. 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.